

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000207563

**Entity Name:** SAME WAVE PSYCHIATRY LLC

**Current Principal Place of Business:**

875 PINE HILL BOULEVARD  
GENEVA, FL 32732

**Current Mailing Address:**

875 PINE HILL BLVD  
GENEVA, FL 32732 US

**FEI Number:** 85-2182417

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COOPER, ERIKA  
875 PINE HILL BLVD  
GENEVA, FL 32732 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** ERIKA COOPER

01/30/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            APRN  
Name            COOPER, ERIKA M  
Address        875 PINE HILL BLVD  
City-State-Zip: GENEVA FL 32732

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ERIKA M COOPER

APRN

01/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date